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CORRESPONDENCE ADDRESS
Application**

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

Application Number	09/960,603
Filing Date	9/21/2001
First Named Inventor	PECUS
Art Unit	2152
Examiner Name	-
Attorney Docket Number	4940/12

Please change the Correspondence Address for the above-identified application to:

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I am the :

Applicant/Inventor.

Assignee of record of the entire interest.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

Attorney or Agent of record.

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

RECEIVED
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Technology Center 2100

Typed or Printed
Name

DAVID A. LOEWENSTEIN

Signature

David A. Loewenstein

Date

11/4/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.